

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO. | DATE     |
|---------------------|----------|--------|----------|
| FEE DETERMINATION   | VT       | 6010   | 12/1/00  |
| O.I.P.E. CLASSIFIER |          | 16     | 12699    |
| FORMALITY REVIEW    | LH       | 60105  | 12-20-00 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

| Claim | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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